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FM AMEMBASSY CAIRO  
TO SECSTATE WASHDC 1805

UNCLAS E F T O CAIRO 006192

SIPDIS

NOFORN  
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STATE FOR S/GAC-MJEFFERS, PMAMACOS AND JMAZZONE  
USAID/GH FOR MMILLER AND JWRIGHT  
HHS FOR WSTEIGER

E.O. 12958: N/A

TAGS: [KHIV](#) [EAID](#) [SOCI](#) [TBIO](#) [EG](#)

SUBJECT: EMBASSY CAIRO RESPONSE TO HIV/AIDS AND THE GLOBAL  
FUND: PARALLEL REVIEW PROCESS FOR ROUND SIX PROJECTS

REF: STATE 158244

Sensitive but unclassified. Please protect accordingly.

¶1. (SBU) Per reftel, Embassy Cairo comments on the the Global Fund for AIDS, TB and Malaria Parallel Review Process follow. Responses are keyed to format in reftel.

¶2. Country: Egypt  
Region: Middle East  
Title: Support for the National Plan for the Control of TB Plus

¶A. Proposing Group: National CCM  
Year 1: \$2,898,934  
Year 2: \$2,276,614  
Year 3: \$1,469,614  
Year 4: \$1,409,614  
Year 5: \$1,410,614  
Total Request: \$ 9,465,390

¶B. Overall comments and recommendation for U.S. delegation position: With impressive gains in the provision of quality maternal and child health services, including tuberculosis, Egypt is making noteworthy progress to meet the Millennium Development Goals. GOE disease surveillance and response capabilities are well-positioned to operate in a sustainable manner as demonstrated by the success of the directly observed, short-course (DOTS) strategy against tuberculosis. The Ministry of Health and Population (MOHP) faces major challenges including system-wide financial inefficiency, regional disparities in health services and limited access for the poor and vulnerable. Tuberculosis activities contained in this proposal will improve TB case detection and control for populations of significance, most notably the rural poor, urban slum dwellers, prisoners and refugees.

¶C. Comments on the TRP review: Post concurs with TRP review; the comments are relevant and appropriate. In particular, the TRP identified issues of insufficient clarity regarding the participation of private sector providers and the financial gap calculation. Should the proposal receive funding, beneficiary tracking, effectiveness of the referral system and its impact on raising case detection rates will require monitoring.

¶D. Other public health and scientific considerations: N/A

¶E. Coordination with other partners: TB program implementation has been strong historically, principally funded by the Netherlands, USAID and, in 2004, the GFATM Round 2 Grant. No formal coordination mechanism exists. The

MOHP acts in a transparent manner with bilateral and UN agencies for TB and HIV/AIDS. In addition to the GFATM Grant, the GOE TB program currently receives assistance from WHO and JICA. USAID supports a communication effort for private sector pharmacists to detect chronic cough and refer clients.

The CCM is minimally functional.

F. Political Considerations: Health is one of the GOE's high-priority sectors, with a dynamic and visionary minister appointed nine months ago. Under his leadership, the Ministry of Health and Population is undergoing a significant and broad reaching reform process to improve the health care system. The long-range MOHP restructuring plan will require short-term gains in high-quality primary care services with seven priority areas identified to achieve fast and felt changes. Outreach activities for underserved populations to be funded in this proposal will assist the MOHP in its efforts to enhance community confidence in GOE health services.

G. Additional Comments: N/A

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